

COMMONWEALTH OF VIRGINIA
DECLARATION OF CANDIDACY

I, _____, _____, _____, _____, _____,

FIRST NAME

MIDDLE OR MAIDEN NAME

LAST NAME

SUFFIX, IF ANY

RESIDENT ADDRESS

of the city/county/town of _____, hereby declare myself to be a candidate for the
office of _____ in the _____

ENTER CONGRESSIONAL, STATE SENATE OR HOUSE, OR LOCAL DISTRICT, IF APPLICABLE; OTHERWISE LEAVE BLANK

District in the election to be held on _____, 20 _____. [CHECK ONE SQUARE BELOW]

☐

General

☐

Special

☐

Democratic Primary

☐

Republican Primary

If I am a candidate in a primary and am defeated in the primary, my name is not to be printed on the ballots to be used in the succeeding general election for the same office.

Given under my hand this _____ day of _____, 20 _____.

SIGNATURE OF CANDIDATE

PRINTED NAME OF CANDIDATE

MAILING ADDRESS

CITY/TOWN

STATE

ZIP

(AREA CODE) HOME TELEPHONE

(AREA CODE) OFFICE TELEPHONE

To be completed by witnesses **OR** notary

THIS DECLARATION MUST BE ACKNOWLEDGED BEFORE A NOTARY OR OTHER OFFICER AUTHORIZED TO TAKE ACKNOWLEDGEMENTS **OR**
WITNESSED BEFORE TWO PERSONS REGISTERED AND QUALIFIED TO VOTE IN THE ELECTION DISTRICT IN WHICH THE CANDIDATE OFFERS FOR OFFICE.

State of _____ County/City of _____

_____, whose name is signed to the foregoing instrument, has acknowledged

PRINT NAME OF CANDIDATE

the same before me this _____ day of _____, 20 _____.

WITNESSED:

1. _____

SIGNATURE OF QUALIFIED VOTER

2. _____

SIGNATURE OF QUALIFIED VOTER

PRINT FULL NAME

PRINT FULL NAME

RESIDENT ADDRESS

RESIDENT ADDRESS

CITY/TOWN

ZIP

CITY/TOWN

ZIP

OR

SIGNATURE OF NOTARY OR OTHER OFFICER

My commission expires _____.

THIS DECLARATION OF CANDIDACY MUST BE FILED WITH PETITIONS CONTAINING THE REQUIRED NUMBER OF SIGNATURES OF REGISTERED VOTERS. TO OBTAIN ALL
REQUIRED FORMS AND CANDIDATE INFORMATION BULLETINS WHICH DETAIL QUALIFICATIONS, NUMBER OF SIGNATURES REQUIRED, WHERE TO FILE AND FILING
DEADLINES, CALL THE STATE BOARD OF ELECTIONS AT:

804-864-8901 **OR** OUTSIDE THE RICHMOND CALLING AREA, TOLL-FREE 800-552-9745.